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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number

10/749,046

Filing Date

December 29, 2003

First Named Inventor

William J. Boyle

Art Unit

3767

Examiner Name

Jaime W. Corrigan

Total Number of Pages in This Submission

Attorney Docket Number

ACSES 66147 (1738C)

ENCLOSURES (Check all that apply)

- Fee Transmittal Form
- Fee Attached
- Amendment / Reply
 - After Final
 - Affidavits/declaration(s)
- Extension of Time Request
- Express Abandonment Request
- Information Disclosure Statement
- Certified Copy of Priority Document(s)
- Reply to Missing Parts/ Incomplete Application
- Reply to Missing Parts under 37 CFR 1.52 or 1.53

- Drawing(s)
- Licensing-related Papers
- Petition
- Petition to Convert to a Provisional Application
- Power of Attorney, Revocation Change of Correspondence Address
- Terminal Disclaimer
- Request for Refund
- CD, Number of CD(s) _____
- Landscape Table on CD

Remarks

CUSTOMER NO. 24201

- After Allowance Communication to TC
- Appeal Communication to Board of Appeals and Interferences
- Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
- Proprietary Information
- Status Letter
- Other Enclosure(s) (please identify below):

\$180.00
Postcard

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

FULWIDER PATTON LLP

Signature

Printed name

THOMAS H. MAJCHER

Date

DECEMBER 6, 2006

Reg. No. 31,119

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

THOMAS H. MAJCHER

Date

DECEMBER 6, 2006

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PTO/SB/17 (07-06)

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U.S. PATENT AND TRADEMARK OFFICE
APR 8 2007

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2006

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
\$180.00**Complete if Known**

Application Number	10/749,046
Filing Date	December 29, 2003
First Named Inventor	William J. Boyle
Examiner Name	Jaime W. Corrigan
Art Unit	3767
Attorney Docket No.	ACSES-66147 (1738C)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Deposit Account Number: 06-2425 Deposit Account Name: FULWIDER PATTON LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or any underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid(\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small EntityFee (\$)

Each independent claim over 3 (including Reissues)

50

Multiple dependent claims

25

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	\$50.00	= \$0.00		

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	\$200.00	= \$0.00		

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	0	/ 50 0 (round up to a whole)	x \$250.00 = \$0.00	

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supp IDS

\$180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	31,119	Telephone	310 824 5555
Name (Print/Type)	THOMAS H. MAJCHER		Date	DEC. 6, 2006	

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